Image# 201904149146116661 PAGE 1 / 1

## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						<del></del>	
	Fischer, Debra, S., ,  (b) Address (number and street)	☐ Check if address changed				2. Candidate's FEC Identification Number		
	5555 South St, Ste. 200	Check if address changed				S2NE00094		
	(c) City, State, and ZIP Code					3. Is This New	Amended	
	Lincoln					Statement (N) OR	(A)	
4.	Party Affiliation	5. Office Sough	nt			rict of Candidate		
	REPUBLICAN PARTY	Senate			NE			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 election(s). (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
Deb Fischer for US Senate								
_	(b) Address (number and street)							
	5555 South St, Ste 200							
	(c) City, State, and ZIP Code							
	Lincoln				NE	68506		
	DE	SIGNATION	N OF OT	HFR AU	THORIZED	COMMITTEES		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my								
	candidacy.							
NOTE: This designation should be filed with the principal campaign committee.								
(a) Name of Committee (in full)								
(b) Address (number and street)								
(b) riddioso (nambol did diloot)								
(c) City, State, and ZIP Code								
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	·	minea this State	ement and to	tne best of	ту кпоміеаде а	nd belief it is true, correct and comp	lete. 	
	gnature of Candidate					Date		
Fi	ischer, Debra, S, ,			[Elec	tronically Filed]	04/10/2019		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.								
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FEC FORM 2 (REV. 02/2009)